

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

RESEARCH & DEVELOPMENT TAX CREDIT APPLICATION

FOR DRA USE ONLY

| Taxable period end date: | | Date of Re | Date of Request: | |
|--------------------------|--|---|-----------------------------------|--|
| DDI | MONTH DAY YEA | AR | MONTH DAY YEAR | |
| | ME (PRINCIPAL NH FILER IF COMBINED GROUP): | 5 | FEDERAL IDENTIFICATION NUMBER: | |
| | | | | |
| STR | REET ADDRESS: | 5(a) | SOCIAL SECURITY NUMBER: | |
| ADD | DRESS (CONTINUED): | 5(b) | DEPARTMENT IDENTIFICATION NUMBER: | |
| CITY | Y/STATE/ZIP: | | | |
| COI | TACT NAME & TITLE TELEPHONE NUMBER: | | | |
| | | | | |
| | alified Manufacturing Research & Development expenditure tach copy of Federal Form 6765, Credit for Increasing | ` | eral return | |
| Qua | Qualified Manufacturing Research & Development expenditures (wages only) attributable to NH | | | |
| Am | nount of Research & Development Credit requested (Line | 7 x 10%) not to exceed \$ | 50.000 | |
| | | , | | |
| | Do not submit this applie | cation without the | rederal Form 6/65. | |
| | | | | |
| SIGNATURE (IN INK) | | DATE | | |
| | | | | |
| PRINT | SIGNATORY NAME & TITLE | | | |
| MAIL | TO: NH DRA | | | |
| | PO BOX 488 CONCORD NH 03302-0488 | | | |

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RESEARCH & DEVELOPMENT TAX CREDIT APPLICATION

LINE BY LINE INSTRUCTIONS

ABOUT THE RESEARCH & DEVELOPMENT TAX CREDIT

RSA 77-A:5, XIII allows for a Research & Development Credit for qualified manufacturing research & development expenditures made or incurred during the fiscal year of the company. The taxpayer shall apply for this credit using the Research and Development Tax Credit Application (Form DP-165) which shall be postmarked no later than **June 30** following the taxable period during which research and development expenditure was made or incurred.

TAXABLE PERIOD END DATE

Include the taxable period end date of the company.

DATE OF REQUEST

Enter the current date of the application.

LINES 1 THROUGH 5

Enter the Principal Filer's Name, Address, the Contact Person's Name and Title, Federal Employer Identification Number (FEIN), Social Security Number (SSN), or Department Identification Number (DIN) of the entity requesting the Research and Development Credit. Wherever FEINs are required, taxpayers who have been issued a DIN shall use their DIN only and not their FEIN.

LINE 6

Enter the amount of the Qualified Manufacturing Research & Development expenditures as defined in RSA 77-A:5, XIII(b)(1), and reported on Line 5 the Federal Form 6765 (wages only). Attach a copy of Federal Form 6765.

LINE 7

Enter the amount of the Qualified Manufacturing Research & Development expenditures as defined in RSA 77-A:5, XIII(b)(1) that are attributable to New Hampshire activities (wages only).

LINE 8

Enter the amount of Research & Development Credit requested by multiplying the New Hampshire Qualified Manufacturing Research & Development expenditures by 10 percent (Line 7 x 10%), not to exceed \$50,000

SIGNATURES

The application must be dated and signed in ink by the taxpayer or authorized agent. In addition, print the name and title of the officer or authorized agent signing the application.

Do not submit this application without the Federal Form 6765.

WHERE TO MAIL

Mail to: NH DRA, PO Box 488, Concord, NH 03302-0488